

# First Report of Injury Search



REV 3/2024

## QuickStart Guide

One of the newest Self-Services provided by CompHub is the FROI (First Report of Injury) Search. This utility allows you to query Commission records for any FROIs on file.

**You can find this process by clicking Start New Action > FROI Search.**

FROI Search > FROI Search

You must enter two pieces of information to search for the First Report of Injury. NOTE: If your search includes First Name or Last Name, you must also include another data element.

First Name:	<input type="text" value="Seth"/>
Last Name:	<input type="text" value="Rollins"/>
SSN:	<input type="text" value="123456789"/>
Date of Birth:	<input type="text" value="MM/dd/yyyy"/>
Date of Injury:	<input type="text" value="MM/dd/yyyy"/>

▼ FROI Search Results

No records

**1** Enter the required amount of information. Note the search considerations above (If using a first and last name a third field is required).

**2** Click Search.

▼ FROI Search Results

Select	First Name	Last Name	Date of Injury	File Date
<input checked="" type="checkbox"/>	Seth	Rollins	01/15/2024	01/23/2024

**3** Select the FROI by checking the corresponding checkbox and clicking "Submit" in the bottom right hand corner.

# FROI Search - Cont.

## QuickStart Guide

Once you've selected the FROI CompHub will display the complete filing of the FROI in electronic format.

Employee			
Employee First Name:	Seth	Employee Middle Initial:	
Employee Gender:	Male	Employee Last Name:	Rollins
Occupation			
Job Title:	Sports Entertainer	NCCI Class Code:	
Date Hired:	01/01/2024	Employment Status:	Full-Time
Wage Period:	Monthly	State Hired:	MD
		Days Worked per Week:	5
Occurrence/Injury			
Timeframe			
Date/Time Work Began:		Date/Time of Injury:	01/15/2024 10:00 pm
Date Employer Notified:	01/16/2024	Date of Injury:	
Date Administrator Notified:	01/16/2024	Time Cannot Be Determined:	<input type="checkbox"/>
Date Last Worked:	01/15/2024		
Date of Death (if fatal):			
Date Disability Began:		Was Paid Full Day:	No
Date Returned to Work:		Did Salary Continue:	No
Employer			
Employer Name:	SPORTS ENTERTAINMENT		
Primary Contact Information			
Employer Contact Name:	Linda James	Employer Contact Phone:	4105555555
Employer Address Line 1:	10 E Baltimore St	Employer US State:	MD
Employer City:	Hanover	Employer Postal Code:	21076
Carrier			
Carrier Name:	GENERIC INSURANCE		
Policy Number:	127179890		
Contact Information			
Carrier Phone:	2405550145		
Carrier Address Line 1:	7700 Milestone Parkway	Carrier US State:	
Carrier City:	Hanover	Carrier Postal Code:	21076
Administrator			
Admin Name:	Boss Man		

CompHub will display an Electronic Record of the FROI you've searched for, specific fields entered by the filer will be visible on the form.